



San Joaquin County Emergency Medical Services Agency



Acknowledgement of CQI Program Confidentiality

As a participant in the San Joaquin County CQI program involved in the evaluation and improvement of the quality of care rendered to patients in the field and in San Joaquin County hospitals, I recognize that confidentiality is vital to the free and candid discussions that are necessary for effective system quality improvement activities, as required by Sections 1157 and 1157.7 of the Evidence Code of the State of California. Therefore, I shall respect and maintain the confidentiality of all discussions, deliberations, records and other information generated in connection with these activities, and agree to make no disclosures of such information except to persons authorized to receive it in the conduct of the EMS System.

Furthermore, my participation in the CQI activities is in reliance on my belief that every other member of the CQI team will similarly preserve the confidentiality of these activities. I understand that all affected persons and agencies are entitled to undertake such action as is deemed appropriate to ensure that his confidentiality is maintained, including action necessitated by any breach of threatened breach thereof.

DATE: _____ SIGNED: _____

PRINT NAME/TITLE: _____